

RCE #
Zhu
PATENT

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

February 24, 2006
Date

Ayesha J. Shaikh

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/824,852 Confirmation No. : 9969
Applicants : Simon Jacobs, Derek Krezeski, Guy Druce, Murray Petryshen, Randy Roesler and
Warren Cree
Filed : April 2, 2001 Attorney Docket No. : 500744.03
Art Unit : 3623 Customer No. : 27,076
Examiner : Beth Van Doren
Title : ENTERPRISE SCHEDULING SYSTEM FOR SCHEDULING MOBILE SERVICE
REPRESENTATIVES

REQUEST FOR CONTINUED EXAMINATION (RCE)
UNDER 37 C.F.R. § 1.114

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants request continued examination, under 37 C.F.R. § 1.114, of the above-identified application.

1. Submission Required Under 37 C.F.R. § 1.114

- a. ☐ Submission previously submitted
- i. ☐ Consider the amendment/reply under 37 C.F.R. § 1.116 previously filed on _____.
 - ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
 - iii. ☐ Consider the Information Disclosure Statement (IDS) previously filed on _____.

b. ☒ Submission enclosed

- i. ☒ Amendment/Response under 37 C.F.R. § 1.116
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)

2. Suspension of Action (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required)

☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

3. Accompanying Papers

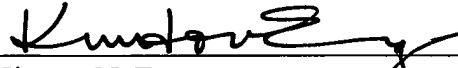
- ☒ Postcard
- ☒ Check
- ☒ Fee Transmittal Sheet
- ☐ Petition

4. Deposit Account

☒ The Commissioner is authorized to charge any additional fees required or credit any overpayment to Deposit Account No. 50-1266.

Respectfully submitted,

Date: February 24, 2006

By: 
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